

P1300000416093

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 MAY 24 PM 12:47

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MD 5/28

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Senior Information Center Holdings, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Bryan Plonsky  
Name (Printed or typed)  
1200 S. Rogers Circle #4  
Address  
Boca Raton, FL 33487  
City, State & Zip  
561-998-6039  
Daytime Telephone number  
Stephen@seniorinformationcenters.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Senior Information Center Holdings, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1200 S. Rogers Circle

Suite 4

Boca Raton, FL 33487

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To hold the franchise corporation

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Bryan Plonsky</u>	Name and Title:	<u>Stephen Wolfe</u>
Address	<u>1200 S. Rogers Circle</u>	Address:	<u>1200 S. Rogers Circle</u>
	<u>Suite 4</u>		<u>Suite 4</u>
	<u>Boca Raton, FL 33487</u>		<u>Boca Raton, FL 33487</u>

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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CLERK OF DISTRICT COURT  
NINTH JUDICIAL CIRCUIT  
MIAMI ASSOCIATES, FLORIDA

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Bryan Plonsky  
Address: 1200 S. Rogers Circle #4  
Boca Raton, FL 33487

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Bryan Plonsky  
Address: 1200 S. Rogers Circle #4  
Boca Raton, FL 33487

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

5/20/13  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

5/20/13  
Date